



July 11, 2019

Web Announcement 1927

Modernization: Update Regarding Timely Filing Requirements Related to Retro-eligibility

As the Date of Decision for recipient eligibility is available in the Electronic Verification System (EVS) as of July 1, 2019, providers are notified the timely filing requirements related to retro-eligibility will be enforced. As of August 12, 2019, retro-eligibility requests will be denied if they are not submitted timely.

Please remember that authorization must be received within the time frames listed below:

- **Ten business days** if the recipient was not Medicaid-eligible upon admission, but obtained retroactive eligibility during their stay. If a recipient has been in the hospital for over 30 days when retroactive eligibility is determined, providers must:
 - Submit clinical information in (at least) 30-day increments and
 - Provide a weekly summary of the treatment plan for the date range(s) submitted.
- **Ninety calendar days** from the date of decision if the recipient obtained retroactive eligibility after discharge. These retro-eligible notification requirements apply even if a recipient has Third Party Liability (TPL).